## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10816129

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHE	OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Coli	(Column 2)		TYPE		OR	SMALL ENTITY		
			<u> </u>					RATE	FEE	4	RATE	FEE	
-	OR .		NUMBER	FILED	NUM	NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
T	OTAL CHARGE	ABLE CLAIMS	C mi	nus 20=	* .	_		X\$ 9=		OR	X\$18=		
١	DEPENDENT (			inus 3 =				X43=		OR	X86=		
L		NDENT CLAIM F						+145=		OR	+290=		
*	f the differenc	e in column 1 is	ess than zero, enter "0" ir			column 2	•	TOTAL	1	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1)			<del></del>	(Colum		(Column 3)	٠ ــ	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		z		· X\$ 9=		OR	X\$18=		
AME	Independent			CL AINA	-		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
		, ,				·		TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE	<u> </u>	<b>.</b>	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=	<b> </b>	X43=		1 t	X86=		
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	<u> </u>		
								+145=		OR	+290=	•	
							ΑĽ	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
	•	(Column 1) CLAIMS		(Column		(Column 3)			• •				
AMENDMENTC		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE	
	Tota!	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent		Minus	***		=	$\vdash$	X43=					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	A-10=		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.													
11	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR A	TOTAL DIT. FEE		
T	he *Highest Num	ber Previously Paid	For (Total or I	independent	ss than ) is the h	ighest number f			opriate box				